

## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Group Art Unit:: N/A  
CD-ROM or CD-R?:: None  
Sequence submission?:: None  
Computer Readable Form (CRF)?:: No  
Title:: TISSUE EXTRACTION AND MACERATION  
DEVICE  
Attorney Docket Number:: 022956-0223  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Total Drawing Sheets:: 10  
Small Entity?:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Robert  
Family Name:: Boock  
City of Residence:: Braintree  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 802 Mathew Court, #208  
City of mailing address:: Braintree  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02184

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Nathan  
Middle Name:: S.  
Family Name:: Cauldwell  
City of Residence:: Attleboro  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 108 Holcott Drive  
City of mailing address:: Attleboro  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02703

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Keith  
Middle Name:: M.  
Family Name:: Orr  
City of Residence:: Boston  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 7 Dwight Street, Unit #5  
City of mailing address:: Boston  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02118

#### **Correspondence Information**

Correspondence Customer Number:: 021125

**Repr s ntative Information**

Representative Customer Number:: 021125